FINANCIAL STATEMENTS AND REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS RUSSELL REGIONAL HOSPITAL BOARD D/B/A RUSSELL REGIONAL HOSPITAL JULY 31, 2011 AND 2010

CONTENTS

	Page
MANAGEMENT'S DISCUSSION AND ANALYSIS	1
REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS	6
FINANCIAL STATEMENTS BALANCE SHEETS STATEMENTS OF REVENUES, EXPENSES, AND CHANGES	7
IN NET ASSETS	8
STATEMENTS OF CASH FLOWS	9
NOTES TO FINANCIAL STATEMENTS	11

RUSSELL REGIONAL HOSPITAL BOARD D/B/A RUSSELL REGIONAL HOSPITAL MANAGEMENT'S DISCUSSION AND ANALYSIS Years ended July 31, 2011 and 2010

Our discussion and analysis of the financial performance of the Russell Regional Hospital Board d/b/a Russell Regional Hospital (the County Hospital Board) provides a narrative overview of its financial activities for the years ended July 31, 2011 and 2010. Please read it in conjunction with the accompanying basic financial statements.

Financial highlights

The net assets of the County Hospital Board increased by \$302,855 or 3.46 percent during the 2011 fiscal year and decreased by \$803,816 or 8.42 percent during the 2010 fiscal year.

WCKA, a component unit of the County Hospital Board, reported decreases of \$650,379 and \$121,603 in its operating losses for the 2011 and 2010 fiscal years, respectively.

Using these financial statements

The financial statements of the County Hospital Board consist of three statements - a Balance Sheet; a Statement of Revenues, Expenses, and Changes in Net Assets; and a Statement of Cash Flows. These financial statements and related notes provide information about the activities of the County Hospital Board, including resources held by or for the benefit of the County Hospital Board, and resources restricted for specific purposes by contributors and grantors.

One of the most important questions asked about finances of the County Hospital Board is, "Is the County Hospital Board as a whole better or worse off as a result of the year's activities?" The Balance Sheet and the Statement of Revenues, Expenses, and Changes in Net Assets report information about the resources of the County Hospital Board and its activities in a way that helps answer this question. These statements include all restricted and unrestricted assets and all liabilities using the accrual basis of accounting. For purposes of these two statements, revenues and expenses are taken into account regardless of when cash is received or paid.

These two statements report the net assets of the County Hospital Board and changes in them. Net assets of the County Hospital Board - the difference between assets and liabilities - may be thought of as one way to measure its financial health, or financial position. Over time, increases or decreases in the net assets of the County Hospital Board are one indicator of whether its financial health is improving or deteriorating. Consideration must also be given to other nonfinancial indicators, such as changes in the patient base of the County Hospital Board and measures of the quality of service it provides to the community, as well as local economic factors, to assess the overall health of the County Hospital Board.

The final required statement is the Statement of Cash Flows. The statement reports cash receipts, cash payments, and net changes in cash resulting from operations, investing, and financing activities. It provides answers to such questions as "Where did cash come from?", "What was cash used for?", and "What was the change in cash balance during the reporting period?"

RUSSELL REGIONAL HOSPITAL BOARD D/B/A RUSSELL REGIONAL HOSPITAL MANAGEMENT'S DISCUSSION AND ANALYSIS - CONTINUED Years ended July 31, 2011 and 2010

Assets, liabilities, and net assets

The balance sheets of the County Hospital Board as of the end of each of the last three years are summarized as follows:

	2011	2010	2009
Assets			
Current assets	\$ 597 , 696	\$ 380,612	\$ 306,186
Assets limited as to use	2,504,719	2,331,777	2,375,431
Capital assets, net	4,797,145	5,094,176	5,533,647
Other assets	1,165,209	954,430	1,350,865
Total assets	\$9,064,769	\$8,760,995	\$9,566,129
Liabilities			
Current liabilities	\$ 14,561	\$ 13,642	\$ 14,960
Total liabilities	\$ 14,561	\$ 13,642	\$ 14,960
Net assets	\$9,050,208	\$8,747,353	\$9,551,169

Other assets consist primarily of the County Hospital Board's residual interest in WCKA's net assets. The County Hospital Board's residual interest in WCKA's net assets increased by \$210,779 during the year ended July 31, 2011. It decreased by \$396,435 and \$553,230 during the years ended July 31 2010, and 2009, respectively, due to losses incurred by WCKA.

On November 4, 2003, a majority of the qualified electors of the County approved, at a special bond election, the question of whether to issue general obligation bonds of the County in an amount not to exceed \$5,500,000 to pay the costs of making improvements to the hospital facility. The County issued its General Obligation Hospital Bonds, Series 2004, on July 1, 2004, in the amount of \$5,500,000. Costs incurred by the County Hospital Board subsequent to issuance of the bonds for renovations and additions to its facility were submitted to the County for reimbursement from the bond proceeds. Reimbursements received and costs paid directly from the bond proceeds were recorded as capital contributions.

To the extent that resources are available, the County Hospital Board and WCKA have agreed to transfer funds to the County for purposes of making principal and interest payments on the bonds as they come due. However, it is uncertain what amounts, if any, the two entities will be able to transfer to the County in future periods. The County Hospital Board transferred \$424,065, \$428,165, and \$426,965 to the County during the 2011, 2010, and 2009 fiscal years, respectively, to pay principal and interest due on the bonds.

RUSSELL REGIONAL HOSPITAL BOARD D/B/A RUSSELL REGIONAL HOSPITAL

MANAGEMENT'S DISCUSSION AND ANALYSIS - CONTINUED

Years ended July 31, 2011 and 2010

The net assets of the County Hospital Board increased by \$302,855 or 3.46 percent during the 2011 fiscal year and decreased by \$803,816 or 8.42 percent during the 2010 fiscal year.

WCKA's balance sheets as of the end of each of the last three years are summarized as follows:

	2011	2010	2009
Assets			
Current assets	\$2,277,903	\$2,246,116	\$2,491,937
Assets limited as to use	169,433	225,000	
Capital assets, net	1,410,509	984,845	1,218,741
Total assets	\$3,857,845	\$3,455,961	\$3,710,678
Liabilities			
Current liabilities	\$1,651,281	\$1,736,025	\$1,888,757
Long-term obligations	917,788	540,506	471,056
Due to lessor	1,165,209	954,430	1,350,865
Total liabilities	\$3,734,278	\$3,230,961	\$3,710,678
Net assets	\$ 123,567	\$ 225,000	\$ -

WCKA was organized on June 23, 1997, and on August 1, 1997, it assumed custody of assets and liabilities related to hospital operations from the County Hospital Board pursuant to a 10-year lease agreement. The lease agreement has been extended for an additional 10-year term. At the end of the lease term, WCKA has agreed to return all of its net assets to the County Hospital Board. Accordingly, WCKA's net assets are presented as a liability ("due to lessor") in its financial statements. The residual interest in WCKA's unrestricted net assets is presented as an asset in the financial statements of the County Hospital Board.

WCKA's net assets increased by \$109,346 or 9.27 percent during the 2011 fiscal year and decreased by \$171,435 or 12.69 percent during the 2010 fiscal year.

RUSSELL REGIONAL HOSPITAL BOARD D/B/A RUSSELL REGIONAL HOSPITAL MANAGEMENT'S DISCUSSION AND ANALYSIS - CONTINUED Years ended July 31, 2011 and 2010

Operating results and changes in net assets

The operating results and changes in net assets for the County Hospital Board during each of the last three years are summarized as follows:

	2011	2010	2009
Operating revenues Operating expenses	\$ 7,548 618,760	\$ 6,394 682,225	\$ 4,910 822,011
Operating loss	(611,212)	(675,831)	(817,101)
Property taxes Sales taxes Other nonoperating revenue, net Capital grants and contributions Transfers to WCKA Transfers to Russell County Change in obligation of lessee to lessor	611,945 540,599 219,923 144,249 (389,363) (424,065)	539,370 482,254 126,299 146,239 (597,547) (428,165)	611,464 541,585 113,282 365,523 (524,449) (426,965)
Change in net assets	\$ 302,855	\$ (803,816)	\$ (689,891)

Operating expenses consist primarily of depreciation on capital assets; \$476,235, \$509,054, and \$532,274 during each of the years ended July 31, 2011, 2010, and 2009, respectively.

WCKA's operating results and changes in net assets for each of the last three years are summarized as follows:

	2011	2010	2009
Operating revenues Operating expenses	\$12,633,956 13,141,750	\$12,112,711 13,270,884	\$12,348,488 13,628,264
Operating loss	(507,794)	(1,158,173)	(1,279,776)
Ambulance subsidy Other nonoperating revenue,	315,000	235,810	264,832
net Capital grants and	(87,223)	(71,619)	(62,735)
contributions Transfers from County		225,000	
Hospital Board	389,363	597,547	524,449
Change in net assets	109,346	(171,435)	(553,230)

The first, and most significant, component of the overall change in WCKA's net assets is its operating loss - generally, the difference between net patient service revenue and the expenses incurred to perform those services. WCKA has reported operating losses during each of the past three years, but they decreased by \$650,379 and \$121,603 during the 2011 and 2010 fiscal years, respectively.

RUSSELL REGIONAL HOSPITAL BOARD D/B/A RUSSELL REGIONAL HOSPITAL MANAGEMENT'S DISCUSSION AND ANALYSIS - CONTINUED Years ended July 31, 2011 and 2010

Gross and net patient service revenue for the past three years are analyzed as follows:

	2011	2010	2009
Inpatient services	\$ 5,180,747	\$ 5,224,269	\$ 5,883,662
Outpatient services	13,260,971	12,660,982	11,868,718
Physician services	2,299,128	2,040,470	2,051,254
_	and the state of t		
Gross patient service revenue	20,740,846	19,925,721	19,803,634
Contractual adjustments Medicaid disproportionate	(7,457,020)	(7,263,351)	(7,073,815)
share payments	217,227	257,380	272,832
Provision for bad debts	(755,676)	(751,304)	(604,776)
Charity care	(197,228)	(164,517)	(187,413)
Net patient service revenue	\$12,548,149	\$12,003,929	\$12,210,462

WCKA raised its charge rates in certain areas during each of the past three years. The remainder of the overall changes in gross patient service revenue during the past three years is due to changes in inpatient and outpatient volume. Gross revenues from inpatient services decreased by 0.8 percent during the 2011 fiscal year, decreased by 11.2 percent during the 2010 fiscal year, and decreased 2.0 percent during the 2009 fiscal year. Those changes were greatly influenced by variations in the number of patient days. Total patient days (acute and swing-bed combined) decreased by 7.4 percent, 16.8 percent, and 8.3 percent during the 2011, 2010, and 2009 fiscal years, respectively. Gains have occurred for revenues from outpatient services (4.7 percent, 6.7 percent, and 16.3 percent during 2011, 2010, and 2009, respectively) as a result of both charge rate increases and more outpatient volume.

WCKA has agreements with various third-party payors that provide for payments to it at amounts different from its established charge rates. These differences are referred to as contractual adjustments. As a percentage of gross patient service revenue they were 36.0 percent, 36.5 percent, and 35.7 percent during 2011, 2010, and 2009, respectively. These values are comparable to those for similar critical access hospitals. As a critical access hospital, contractual adjustments for the Medicare and Medicaid programs are much lower as a percentage of gross charges than they are for most other third-party payors. The contractual adjustment rate for cost reimbursed Medicare and Medicaid services generally rises when patient volume increases, and falls when drops in patient volume are experienced.



Certified Public Accountants and Management Consultants

Brian J. Florea, CPA Derek H. Hart, CPA John R. Helms, CPA Darrell D. Loyd, CPA Eric L. Otting, CPA

Jere Noe, CPA John E. Wendling, CPA Gary D. Knoll, CPA Adam C. Crouch, CPA Heather R. Eichem, CPA

REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Board of Trustees
Russell Regional Hospital Board
d/b/a Russell Regional Hospital

We have audited the accompanying balance sheets of the business-type activity and discretely presented component unit of the Russell Regional Hospital Board d/b/a Russell Regional Hospital (the County Hospital Board), a component unit of Russell County, Kansas, as of July 31, 2011 and 2010, which collectively comprise the County Hospital Board's basic financial statements as listed in the table of contents. These financial statements are the responsibility of the County Hospital Board's management. Our responsibility is to express an opinion on these financial statements based on our audits.

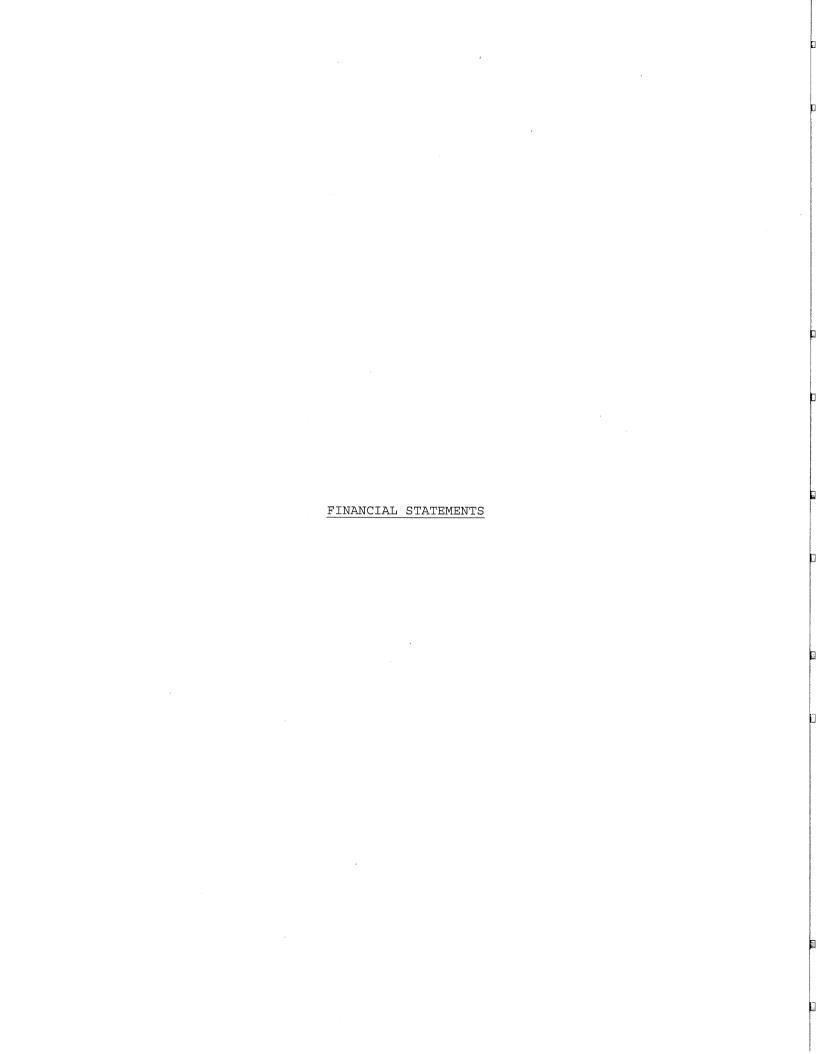
We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the Kansas Municipal Audit Guide. These standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the County Hospital Board's internal control over financial reporting. Accordingly, we express no such opinion. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the business-type activity and discretely presented component unit of the Russell Regional Hospital Board d/b/a Russell Regional Hospital, as of July 31, 2011 and 2010, and their respective results of operations, changes in net assets, and cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Management's discussion and analysis on pages 1 through 5 is not a required part of the basic financial statements but is supplementary information required by the Governmental Accounting Standards Board. We have applied certain limited procedures, which consisted principally of inquiries of management regarding methods of measurement and presentation of the required supplementary information. However, we did not audit the information and express no opinion on it.

Wendling Toe Pelson of Johnson LL C Topeka, Kadsas January 16, 2011

6



RUSSELL REGIONAL HOSPITAL BOARD D/B/A RUSSELL REGIONAL HOSPITAL BALANCE SHEETS July 31,

ASSETS

	2011		2	2010	
	Hospital Board	Component unit	Hospital Board	Component unit	
CURRENT ASSETS Cash Patient accounts receivable, less allowance for uncollectible	\$ 493,792	\$ 512,622	\$ 289,534	\$ 275,922	
accounts of \$399,000 in 2011 and \$388,000 in 2010 Other receivables Sales tax receivable Interest receivable	103,904	1,431,199 2,873	90,212	1,689,167 757	
Inventories Prepaid expenses		203,699 127,510	866	169,221	
Total current assets	597,696	2,277,903	380,612	2,246,116	
ASSETS LIMITED AS TO USE Internally designated For capital assets	1,341,132		1 177 410		
For employee benefits By contributors for capital assets Principal of permanent endowments	866,666 296,921	45,866 123,567	1,177,419 857,437 296,921	225,000	
Total assets limited as to use	2,504,719	169,433	2,331,777	225,000	
CAPITAL ASSETS, NET	4,797,145	1,410,509	5,094,176	984,845	
OTHER ASSETS Due from lessee	1,165,209		954,430	<u> </u>	
Total assets	\$ 9,064,769	\$ 3,857,845	\$ 8,760,995	\$ 3,455,961	

LIABILITIES AND NET ASSETS

	2	011	21	010
	Hospital Board	Component unit	Hospital Board	Component unit
CURRENT LIABILITIES				
Current portion of notes payable to banks	\$ -	\$ 287,231	\$ -	\$ 232,811
Current portion of capital lease obligations		275,194		323,660
Accounts payable Estimated third-party payor	14,561	383,851	13,642	560,616
settlements		7,859		79
Accrued salaries and benefits		425,362		358,389
Accrued compensated absences		271,162		259 , 848
Accrued interest		622		622
Total current liabilities	14,561	1,651,281	13,642	1,736,025
NOTES PAYABLE TO BANKS, less current portion		75,993		223,430
CAPITAL LEASE OBLIGATIONS, less current portion		841,795		317,076
DUE TO LESSOR	No. of the last of	1,165,209	Market and a second a second and a second an	954,430
Total liabilities	14,561	3,734,278	13,642	3,230,961
NET ASSETS				
Invested in capital assets net of related debt Restricted	4,797,145		5,094,176	
Expendable for capital acquisitions Nonexpendable permanent	866,666	123,567	857,437	225,000
endowments	296,921		296,921	
Unrestricted	3,089,476		2,498,819	
Total net assets	9,050,208	123,567	8,747,353	225,000
Total liabilities and				
net assets	\$ 9,064,769	\$ 3,857,845	\$ 8,760,995	\$ 3,455,961

RUSSELL REGIONAL HOSPITAL BOARD D/B/A RUSSELL REGIONAL HOSPITAL STATEMENTS OF REVENUES, EXPENSES, AND CHANGES IN NET ASSETS Year ended July 31,

	2011		2010	
	Hospital Board	Component unit	Hospital Board	Component unit
Operating revenues				
Net patient service revenue Other revenue	\$ - 7,548	\$12,548,149 85,807	\$ - 6,394	\$12,003,929 108,782
Total operating revenues	7,548	12,633,956	6,394	_12,112,711
Operating expenses				
Salaries and wages		7,601,804		7,655,434
Employee benefits		1,420,673		1,557,136
Purchased services, supplies,				
and other	142,525	3,674,725	173,171	3,625,082
Depreciation and amortization	476,235	444,548	509,054	433,232
Total operating expenses	618,760	13,141,750	682,225	13,270,884
Operating loss	(611,212)	(507,794)	(675,831)	(1,158,173)
Nonoperating revenues (expenses)				
Ambulance subsidy		315 000		005 010
Property taxes	C11 04F	315,000	F20 270	235,810
Sales taxes	611,945		539,370	
Investment income	540,599	2 (00	482,254	0.650
Interest expense	8,113	2,688	10,366	2,670
Noncapital grants and		(62,985)		(75,973)
contributions	200 022	0 575	CO 112	1 045
Gain (loss) on disposal of	209,022	9,575	68,113	1,845
capital assets	2,788	(36,501)	47,820	(161)
capital assets		(30,301)	47,020	(161)
Total nonoperating				
revenues (expenses)	1,372,467	227,777	1,147,923	164,191
Excess of revenues over expenses (expenses over revenues) before capital grants and contributions				
and transfers	761,255	(280,017)	472,092	(993,982)
Capital grants and contributions	144,249	(===,	146,239	225,000
Transfers	·		,	,
Between Hospital Board and				
component unit	(389,363)	389,363	(597 , 547)	597,547
To Russell County	(424,065)		(428,165)	
Change in net assets	92,076	109,346	(407,381)	(171,435)
Net assets at beginning of year	8,747,353	225,000	9,551,169	
Change in obligation of lessee to lessor	210,779	(210,779)	(396,435)	396,435
Not aggets at and of war	\$ 9,050,208			
Net assets at end of year	7 7,030,200	\$ 123,567	\$ 8,747,353	\$ 225,000

RUSSELL REGIONAL HOSPITAL BOARD D/B/A RUSSELL REGIONAL HOSPITAL STATEMENTS OF CASH FLOWS Year ended July 31,

	2011		2010	
	Hospital Board	Component unit	Hospital Board	Component unit
Cash flows from operating activities Receipts from and on behalf of				
patients	\$ -	\$12,813,897	\$ -	\$12,157,761
Payments to or on behalf of employees		(8,990,056)		(9,181,234)
Payments for supplies and services Other receipts and payments	(133,132) 	(3,902,429) 83,691	(182,963) 6,394	(3,735,885) 122,168
Net cash provided (used) by				
operating activities	(125,584)	5,103	(176,569)	<u>(637,190</u>)
Cash flows from noncapital financing activities				
Tax levies and ambulance subsidy	1,138,852	315,000	971,418	235,810
Noncapital grants and contributions	209,022	9,575	68,113	1,845
Proceeds from notes payable to banks		164,285		359,982
Payments on notes payable to banks		(257,302)		(156,286)
Interest paid	(000 000)	(20,593)		(16,888)
Transfers	(389,363)	389,363	(597,547)	597,547
Net cash provided by noncapital financing				
activities	958,511	600,328	441,984	1,022,010
Cash flows from capital and related financing activities				
Acquisition of capital assets	(187,678)	(906,713)	(109,188)	(199,553)
Capital grants and contributions	144,249	101 400	146,239	
Collections on pledges receivable Proceeds from sale of capital assets	2,788	101,433	95,899	56
Interest paid	2,700	(42,392)	95,899	(58,463)
Capital lease obligations incurred		794,448		190,750
Payments on capital lease		,,,,,,,		100,750
obligations -		(318,195)		(309,886)
Transfers to Russell County	(424,065)		(428,165)	
Net cash used by capital and related financing				
activities	(464,706)	(371,419)	(295,215)	(377,096)
			· 	

RUSSELL REGIONAL HOSPITAL BOARD D/B/A RUSSELL REGIONAL HOSPITAL STATEMENTS OF CASH FLOWS - CONTINUED Year ended July 31,

	2011		2010	
	Hospital Board	Component unit	Hospital Board	Component unit
Cash flows from investing activities Change in assets limited as to use Interest income received	(173,002) 9,039		43,654 10,586	- 2,670
Net cash provided (used) by investing activities	(163,963)	2,688	54,240	2,670
Net increase in cash and cash equivalents	204,258	236,700	24,440	10,394
Cash and cash equivalents at beginning of year	289,534	275,922	265,094	265,528
Cash and cash equivalents at end of year	\$ 493,792	\$ 512,622	\$ 289,534	\$ 275,922
Reconciliation of operating loss to net cash provided (used) by operating activities Operating loss Adjustments to reconcile operating loss to net cash provided (used) by operating activities	\$ (611,212)	\$ (507,794)	\$ (675,831)	\$(1,158,173)
Depreciation and amortization Provision for bad debts Changes in	476,235	444,548 755,676	509,054	433,232 751,304
Patient accounts receivable		(497,708)		(504,840)
Estimated third-party payor settlements Inventories and other current		7,780		(92,631)
assets Assets limited as to use internally designated for employee benefits	,	(53,055) (45,866)		9,751
Accounts payable and accrued expenses	9,393	(98,478)	(9,792)	(75,833)
Net cash provided (used) by operating activities	\$ (125,584)	\$ 5,103	\$ (176,569)	\$ (637,190)

NOTE A - DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

1. Reporting entity

The Russell Regional Hospital Board d/b/a Russell Regional Hospital (the County Hospital Board) is a county hospital located in Russell, Kansas. It is a component unit of Russell County, Kansas (the County). The County Hospital Board consists of seven members elected by residents of the County. It annually levies a tax to support its activities. The County Hospital Board can sue and be sued, and can buy, sell, or lease real property. Bond issuances must be approved by the County. The component unit discussed in Note A2 is included in the County Hospital Board's reporting entity because of the significance of its relationship with the County Hospital Board.

2. Component unit

The financial statements include the financial data of the discretely presented component unit described below. The component unit is reported separately to emphasize that it is legally separate from the County Hospital Board.

West Central Kansas Association, Inc. d/b/a Russell Regional Hospital (WCKA) is a not-for-profit membership corporation organized to operate an acute care hospital and nursing facility located in Russell, Kansas. WCKA was organized on June 23, 1997, and on August 1, 1997, it assumed custody of assets and liabilities related to hospital operations from the County Hospital Board pursuant to a 10-year lease agreement. The lease agreement has been extended for an additional 10-year term. At the end of the lease term, WCKA has agreed to return all of its net assets to the County Hospital Board, including any property or equipment acquired after inception of the lease. Accordingly, WCKA has recorded an obligation for the estimated liability due to the County Hospital Board at termination of the lease agreement.

3. Use of estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

4. Basis of accounting

The Hospital uses enterprise fund accounting. Revenues and expenses are recognized on the accrual basis using the economic resources measurement focus. Pursuant to Governmental Accounting Standards Board (GASB) Statement No. 20, "Accounting and Financial Reporting for Proprietary Funds and Other Governmental Entities That Use Proprietary Fund Accounting," the County Hospital Board has implemented all GASB pronouncements and only relevant pronouncements of the Financial Accounting Standards Board (FASB) issued before November 30, 1989.

NOTE A - DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

5. Cash and cash equivalents

The County Hospital Board considers all cash and invested cash to be cash equivalents, excluding any assets limited as to use.

6. Allowance for uncollectible accounts

WCKA provides for accounts receivable that could become uncollectible in the future by establishing an allowance to reduce the carrying value of such receivables to their estimated net realizable value. WCKA estimates this allowance based on the aging of its accounts receivable and its historical collection experience for each type of payor.

7. Inventories

Inventories are stated at the lower of cost or market with cost determined on the first-in, first-out method.

8. Investments and investment income

Investments in debt and equity securities are reported at fair value. Interest, dividends, and gains and losses, both realized and unrealized, on investments in debt and equity securities are included in nonoperating revenue when earned.

9. Assets limited as to use

Assets limited as to use include assets set aside by the County Hospital Board for replacement of capital assets or for purchase of additional capital assets, over which the Board retains control and may, at its discretion, subsequently use for other purposes; assets restricted by contributors for a particular purpose; and assets required by contributors to be retained in perpetuity. Amounts that are required for obligations classified as current liabilities are reported in current assets.

10. Capital assets

Capital assets (including assets recorded as capital leases) are stated at cost. Depreciation and amortization of capital assets are provided on the straight-line method over the estimated useful lives of the assets. The estimated lives used are generally in accordance with the guidelines established by the American Hospital Association.

The costs of maintenance and repairs are charged to operating expenses as incurred. The costs of significant additions, renewals, and betterments to depreciable properties are capitalized and depreciated over the remaining or extended estimated useful lives of the item or the properties. Gains and losses on disposition of capital assets are included in nonoperating revenues and expenses.

NOTE A - DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

11. Costs of borrowing

Interest costs, including amortization of deferred financing costs, incurred on borrowed funds during the period of construction of capital assets are capitalized as a component of the cost of acquiring those assets. Costs incurred in connection with the issuance of long-term debt are amortized using the interest method over the term of the related debt.

12. Grants and contributions

From time to time, the County Hospital Board and WCKA receive grants and contributions from individuals and private organizations. Revenues from grants and contributions, including contributions of capital assets, are recognized when all eligibility requirements, including time requirements are met. Grants and contributions may be restricted for either specific operating purposes or for capital purposes. Amounts that are unrestricted or that are restricted to a specific operating purpose are reported as nonoperating revenues. Amounts restricted to capital acquisitions are reported after nonoperating revenues and expenses.

13. Net assets

Net assets of the County Hospital Board are classified in four components. "Net assets invested in capital assets net of related debt" consist of capital assets net of accumulated depreciation and reduced by the balances of any outstanding borrowings used to finance the purchase or construction of those assets. "Restricted expendable net assets" are noncapital net assets that must be used for a particular purpose, as specified by creditors, grantors, or contributors external to the County Hospital Board. "Restricted nonexpendable net assets" equal the principal portion of permanent endowments. "Unrestricted net assets" are remaining net assets that do not meet the definitions of the other three components of net assets.

14. Operating revenues and expenses

The statement of revenues, expenses, and changes in net assets distinguishes between operating and nonoperating revenues and expenses. Operating revenues result from exchange transactions associated with providing health care services, which is the principal activity of the County Hospital Board and WCKA. Nonexchange revenues, including tax levies and noncapital grants and contributions, are reported as nonoperating revenues. Operating expenses are all expenses incurred to provide health care services, other than financing costs.

15. Net patient service revenue

Net patient service revenue is reported at established charges with deductions for discounts, charity care, contractual adjustments, and provision for bad debts, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

NOTE A - DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

16. Charity care

WCKA provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates. Because WCKA does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue.

17. Income taxes

The County Hospital Board is exempt from federal taxes pursuant to Sections 115 and 501(a) of the Internal Revenue Code.

WCKA is a not-for-profit corporation as described in Section 501(c)(3) of the Internal Revenue Code and is exempt from Federal income taxes on its related income pursuant to Section 501(a) of the Code.

18. Subsequent events

The County Hospital Board has evaluated subsequent events through January 16, 2012, which is the date the financial statements were available to be issued.

19. Reclassifications

Certain reclassifications have been made to the 2010 financial statements to conform to the 2011 presentation.

NOTE B - NET PATIENT SERVICE REVENUE

WCKA has agreements with third-party payors that provide for payments to it at amounts different from its established charge rates. The amounts reported on the balance sheet as estimated third-party payor settlements consist of the estimated differences between the contractual amounts for providing covered services and the interim payments received for those services. A summary of the payment arrangements with major third-party payors follows:

Medicare - WCKA is a critical access hospital for purposes of the Medicare program. Hospital and rural health clinic (RHC) services rendered to Medicare beneficiaries are paid under cost reimbursement methodologies. Physician services, other than RHC services, rendered to Medicare beneficiaries are paid based on a prospectively determined fee schedule. WCKA is paid for cost reimbursable items at tentative rates with final settlements determined after submission of annual cost reports by WCKA and audits or reviews thereof by the Medicare administrative contractor. WCKA's classification of patients under the Medicare program and the appropriateness of their admission are subject to an independent review by a peer review organization. WCKA's Medicare cost reports have been audited or reviewed by the Medicare administrative contractor through July 31, 2010.

NOTE B - NET PATIENT SERVICE REVENUE - Continued

Medicaid - Hospital services rendered to Medicaid beneficiaries not enrolled in a Medicaid managed care plan are paid under cost reimbursement methodologies. Hospital services rendered to all other Medicaid beneficiaries are paid at prospectively determined rates. Nursing facility services are paid at prospectively determined per diem rates set annually on the basis of cost information supplied by nursing facilities for preceding calendar years. WCKA is paid for cost reimbursable items at tentative rates with final settlements determined after submission of annual cost reports by WCKA and reviews thereof by the Kansas Department of Health and Environment, Division of Health Care Finance (DHCF). WCKA's Medicaid cost reports have been audited or reviewed by DHCF through July 31, 2009.

Blue Cross and Blue Shield - All services rendered to patients who are insured by Blue Cross-Blue Shield are paid on the basis of prospectively determined rates per discharge or discounts from established charges.

WCKA has also entered into payment agreements with certain commercial insurance carriers and preferred provider organizations. The basis for payment to WCKA under these agreements includes prospectively determined rates per discharge, discounts from established charges, and prospectively determined daily rates.

A summary of gross and net patient service revenue follows:

	<u>2011</u>	2010
Gross patient service revenue Contractual adjustments Medicaid disproportionate share	\$20,740,846 (7,457,020)	\$19,925,721 (7,263,351)
payments Provision for bad debts Charity care	217,227 (755,676) (197,228)	257,380 (751,304) (164,517)
Net patient service revenue	\$12,548,149	\$12,003,929

Revenue from the Medicare and Medicaid programs accounted for approximately 52 percent and 8 percent, respectively, of WCKA's net patient revenue during the year ended July 31, 2011, and 54 percent and 7 percent, respectively, of WCKA's net patient service revenue during the year ended July 31, 2010. Laws and regulations governing the Medicare and Medicaid programs are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term.

NOTE C - DEPOSITS WITH FINANCIAL INSTITUTIONS

Kansas statutes authorize the County Hospital Board, with certain restrictions, to deposit or invest in open accounts, time deposits, certificates of deposit, repurchase agreements, U.S. Treasury Bills and Notes,

NOTE C - DEPOSITS WITH FINANCIAL INSTITUTIONS - Continued

and the State Treasurer's investment pool. Kansas statutes also require that collateral be pledged for bank deposits with a fair market value equal to 100 percent of the uninsured amounts and must be assigned for the benefit of the County Hospital Board.

At July 31, 2011, the carrying amounts of bank deposits, including certificates of deposit, were \$2,998,511 for the County Hospital Board and \$681,187 for WCKA. The bank balances for the two entities were \$3,019,626 and \$780,215, respectively. Of the County Hospital Board's bank balances, \$1,052,207 was covered by federal depository insurance and \$1,967,419 was covered by collateral held by a third-party bank but not registered in the name of the County Hospital Board. Of WCKA's bank balances, \$780,215 was covered by federal depository insurance.

Bank deposits are included in the financial statements under the following categories:

	20	2011		2010		
•	Hospital Board	Component unit	Hospital Board	Component unit		
Unrestricted funds						
Cash and invested cash	\$ 493,792	\$ 511,754	\$ 289,534	\$ 274,782		
Assets limited as to use						
Internally designated						
For capital assets	1,341,132		1,177,419			
For employee benefits	`	45,866				
By contributors for						
capital assets	866,666	123,567	857,437			
Principal of permanent						
endowments	296,921		296,921			
Total bank deposits	\$2,998,511	\$ 681,187	\$2,621,311	\$ 274,782		

NOTE D - ASSETS LIMITED AS TO USE

The composition of assets limited as to use is as follows:

	20	11	2010		
	Hospital Board	Component unit	Hospital Board	Component unit	
Internally designated For capital assets Cash	\$1,341,132	\$ <u>-</u>	\$1,177,419	\$ -	
For employee benefits Cash	\$ -	\$ 45,866	\$ -	\$ -	

NOTE D - ASSETS LIMITED AS TO USE - Continued

	2011		2010	
	Hospital Board	Component unit	Hospital Board	Component unit
By contributors for capital assets Cash and certificates of deposit Interest receivable Pledges receivable	\$ 866,666	\$ 123,567	\$ 857,377 60	\$ - 225,000
	\$ 866,666	\$ 123,567	\$ 857,437	\$ 225,000
Principal of permanent endowments Certificates of deposit	t \$ 296,921	· .	\$ 296,921	ė
continuates of deposit	7 200,021	Y	γ 200,921	7

NOTE E - CAPITAL ASSETS

Capital asset additions, retirements, and balances for the County Hospital Board are as follows:

	2011				
	Transfers				
	Beginning balance	and additions	Retirements	Ending balance	
Land and improvements Buildings and fixed equipment Major movable equipment	\$ 337 9,402,676 1,592,978	\$ - 179,736 29,000	\$ -	\$ 337 9,582,412 1,595,527	
Totals at historical cost	10,995,991	208,736	26,451	11,178,276	
Less accumulated depreciation and amortization Buildings and fixed					
equipment Major movable equipment	4,763,916 1,179,135	380,456 95,779	26,451	5,144,372 1,248,463	
	5,943,051	476,235	26,451	6,392,835	
Construction in progress	41,236	(29,532)		11,704	
Capital assets, net	\$5,094,176	\$ (297,031)	\$ -	\$4,797,145	

NOTE E - CAPITAL ASSETS - Continued

	2010				
		Transfers			
	Beginning balance	and additions	Retirements	Ending balance	
Land and improvements Buildings and fixed equipment Major movable equipment	\$ 337 9,432,946 1,821,973	\$ - (18,325) 94,751	\$ - 11,945 323,746	\$ 337 9,402,676 1,592,978	
Totals at historical cost	11,255,256	76,426	335,691	10,995,991	
Less accumulated depreciation and amortization Buildings and fixed					
equipment	4,382,542	393,319	11,945	4,763,916	
Major movable equipment	1,339,067	115,735	275,667	1,179,135	
	5,721,609	509,054	287,612	5,943,051	
Construction in progress		41,236		41,236	
Capital assets, net	\$5,533,647	<u>\$ (391,392)</u>	\$ 48,079	\$5,094,176	

Capital asset additions, retirements, and balances for WCKA are as follows:

	2011				
	Transfers				
	Beginning balance	and additions	Retirements	Ending balance	
Land improvements Fixed equipment Major movable equipment	\$ - 84,674 2,580,627	\$ 53,065 805,878 45,696	\$ - 589,872	\$ 53,065 890,552 2,036,451	
Totals at historical cost	2,665,301	904,639	589,872	2,980,068	
Less accumulated depreciation and amortization					
Land improvements		1,382		1,382	
Fixed equipment	39,407	29,066		68,473	
Major movable equipment	1,641,049	414,100	553,371	1,501,778	
	1,680,456	444,548	553,371	1,571,633	
Construction in progress		2,074	_	2,074	
Capital assets, net	\$ 984,845	\$ 462,165	\$ 36,501	\$1,410,509	

NOTE E - CAPITAL ASSETS - Continued

	2010				
		Transfers			
	Beginning	and		Ending	
	balance	additions	Retirements	balance	
Fixed equipment	\$ 84,674	\$ -	\$ -	\$ 84,674	
Major movable equipment	2,396,728	199,553	15,654	2,580,627	
Totals at historical cost	2,481,402	199,553	15,654	2,665,301	
Less accumulated depreciation and amortization					
Fixed equipment	29,061	10,346		39,407	
Major movable equipment	1,233,600	422,886	15,437	1,641,049	
	1,262,661	433,232	15,437	1,680,456	
Construction in progress			_		
Capital assets, net	\$1,218,741	\$ (233,679)	\$ 217	\$ 984,845	

On November 4, 2003, a majority of the qualified electors of the County approved, at a special bond election, the question of whether to issue general obligation bonds of the County in an amount not to exceed \$5,500,000 to pay the costs of making improvements to the hospital facility. The County issued its General Obligation Hospital Bonds, Series 2004, on July 1, 2004, in the amount of \$5,500,000. Costs incurred by the County Hospital Board subsequent to issuance of the bonds for renovations and additions to its facility were submitted to the County for reimbursement from the bond proceeds. Reimbursements received and costs paid directly from the bond proceeds were recorded as capital contributions.

To the extent that resources are available, the County Hospital Board and WCKA have agreed to transfer funds to the County for purposes of making principal and interest payments on the bonds as they come due. However, it is uncertain what amounts, if any, the two entities will be able to transfer to the County in future periods. The County Hospital Board transferred \$424,065 and \$428,165 to the County during 2011 and 2010, respectively, to pay principal and interest due on the bonds.

NOTE F - NOTES PAYABLE TO BANKS

WCKA's notes payable to banks are summarized as follows:

		2011	2010
Note payable to UMB Bank, original amount of \$295,000, payable in equal monthly installments of \$12,817, including interest, through January 2013, collateralized by accounts receivable, supplies, inventory, and equipment, interest rate varies with changes in the prime rate, rate in effect as of July 31, 2011, was 4.00%	(5	223,430	\$ 295,000
5.50% note payable to Wilson State Bank, original amount of \$150,000, principal payable on demand but not later than June 16, 2016, interest payable monthly, collateralized by a certificate of deposit held by the County Hospital Board		117,989	140,056
5.00% note payable to Fidelity State Bank & Trust Company, original amount of \$64,503, payable in equal monthly installments of \$7,330, including interest, through October 1, 2011, collateralized by refundable unearned medical malpractice insurance premiums		21,805	
4.50% note payable to Fidelity State Bank & Trust Company, original amount of \$52,657, payable in equal monthly installments of \$5,972, including interest, through October 1, 2010, collateralized by refundable unearned medical malpractice insurance premiums			17,779

NOTE F - NOTES PAYABLE TO BANKS - Continued

	2011	2010
4.50% note payable to Fidelity State Bank & Trust Company, original amount of \$6,766, payable in equal monthly installments of \$1,144, including interest, through October 1, 2010, collateralized by refundable unearned medical malpractice insurance premiums	\$	\$ 3,406
Less current portion of notes payable to bank	363,224	456,241 (232,811)
Note payable to banks, excluding current portion	\$ 75,993	\$ 223,430
Scheduled principal payments on WCKA's notes pa	ayable to banks	are as follows:
2012 2013		\$ 287,231 75,993
		\$ 363,224
The following is a summary of changes in WCKA'	s notes payable	to banks:
	2011	2010
Outstanding at beginning of year Obligations incurred Principal payments	\$ 456,241 164,285 (257,302)	\$ 252,545 359,982 (156,286)
Outstanding at end of year	\$ 363,224	\$ 456,241

NOTE G - CAPITAL LEASE OBLIGATIONS

Capital lease obligations for WCKA are summarized as follows:

	2011	2010
Capital lease obligations, imputed interest rates of 5.5% to 9.5%, collateralized by leased equipment		
with an amortized cost of \$1,101,321 Less current portion of capital lease	\$1,116,989	\$ 640,736
obligations	275,194	 323,660
Capital lease obligations, excluding		
current portion	\$ 841,795	\$ 317,076

Scheduled payments on WCKA's capital lease obligations are as follows:

	Principal	<u>Interest</u>	<u>Total</u>
2012	\$ 275,194	\$ 64,968	\$ 340,162
2013	266,759	45,217	311,976
2014	219,294	27,796	247,090
2015	177,001	15,689	192,690
2016	178,741	5,612	184,353
Total minimum lease payment	\$1,116,989	<u>\$ 159,282</u>	\$1,276,271

The following is a summary of changes in WCKA's capital lease obligations:

	2011	2010
Outstanding at beginning of year Obligations incurred Principal payments	\$ 640,736 794,448 (318,195)	\$ 759,872 190,750 (309,886)
Outstanding at end of year	\$1,116,989	\$ 640,736

NOTE H - OTHER SUPPORT

WCKA is dependent on the County Hospital Board for continuing operations. The support consists of either loans in the form of noninterest-bearing notes or direct equity transfers. The County Hospital Board directly transferred \$389,363 and \$597,547 to WCKA during the years ended July 31, 2011 and 2010, respectively.

NOTE I - OPERATING LEASES

WCKA leases property and equipment from the County Hospital Board under a lease agreement expiring on July 31, 2017. Under the terms of the agreement, WCKA is to make payments for leases and other obligations previously incurred by the County Hospital Board. Amounts due under the agreement are reduced by tax proceeds which are paid toward those obligations by either the County Commissioners or the County Hospital Board. There were no remaining future minimum lease payments due under this agreement as of July 31, 2003.

WCKA also leases equipment under various operating leases. Rental expense for all operating leases was \$28,925 and \$32,596 for the years ended July 31, 2011 and 2010, respectively.

NOTE J - PENSION PLAN

WCKA sponsors a 401(k) profit-sharing plan that covers substantially all full-time employees who have completed one year of service and are at least 21 years of age. WCKA's contributions to the plan are 50 percent of each participant's elective deferral, not to exceed 4 percent of the participant's compensation. Participants may defer up to 24 percent of their annual gross wages. Participant contributions are 100 percent vested at all times and employer contributions are 100 percent vested after three years of service. Total expense related to the plan for the years ended July 31, 2011 and 2010, was \$64,928 and \$62,680, respectively.

NOTE K - CONCENTRATION OF CREDIT RISK

WCKA grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payor agreements. The mix of patient accounts receivable from patients and third-party payors is summarized as follows:

	<u>2011</u>	2010
Medicare Medicaid Blue Cross Other insurance Patients	37.1% 5.6 14.6 13.7 29.0	44.6% 4.2 12.7 11.4 27.1
	100.0%	100.0%

NOTE L - RISK MANAGEMENT

For the year ended July 31, 2011, WCKA was insured for professional liability under a comprehensive hospital liability policy provided by an independent insurance carrier with limits of \$200,000 per occurrence up to an annual aggregate of \$600,000 for all claims made during the policy year. WCKA is further covered by the Kansas Health Care Stabilization Fund for claims in excess of its comprehensive hospital liability policy up to \$800,000 pursuant to any one judgment or settlement against it for any one party, subject to an aggregate limitation for all judgments or settlements arising from all claims made in the policy year in the amount of \$2,400,000. The policy provided by the independent insurance carrier provides for umbrella liability coverage in excess of the underlying limits set forth above in the amount of \$1,000,000 per occurrence with an aggregate amount in any policy year of \$1,000,000. All coverage is on a claims-made basis. The above policies are currently in effect through August 1, 2012. WCKA intends to renew this coverage on that date and is aware of no reason why such coverage would be denied at that time.

No accrual for possible losses attributable to incidents that may have occurred but that have not been identified under WCKA's incident reporting system has been made because the amount is not reasonably estimable. Based on historical experience and present conditions, it is the opinion of management that any claims or expenses for unasserted claims related to periods prior to July 31, 2011, will have no material effect on the financial statements of WCKA or the County Hospital Board.

In addition to the risks disclosed elsewhere in these financial statements and notes thereto, the County Hospital Board and WCKA are exposed to various risks of loss related to torts; theft of, damage to, and destruction of assets; errors and omissions; injuries to employees; and natural disasters. The County Hospital Board and WCKA purchase commercial insurance for these risks. Settled claims have not exceeded this commercial coverage in any of the past three years.